<u>Ayushman Bharat</u>

Mahatma Gandhi Rajasthan Swasthya Bima Yojana



USER MANUAL

Claim Approval Module

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1 APPLICATION LOGIN

- > Open browser and type URL https://sso.rajasthan.gov.in
- Login with your SSO ID and Password

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2 APPLICATION EXECUTION

- > After Login, SSO Dashboard will open. Click on Search Apps on SSO dashboard and type ABMGRSBY.
- Click on ABMGRSBY

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3 DASHBOARD

- > A dashboard will open of Ayushman Bharat Mahatma Gandhi Rajasthan Swasthya Bima Yojana
- > Click on TMS module on dashboard

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> Claim Analyzer and Settlement Dashboard

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4 CLAIM ANALYZER FORM

- > Claim Analyzer checks all the beneficiary details and documents attached.
 - 1. First click on claim analyzer form in left side menu, page opens
 - 2. Click on search TID or manually enter TID and press tab. Details of patient will open.
 - 3. Package details are shown here with 3 options to select Approve, Reject and Query.
 - 4. If the analyzer selects Approve then Approved amount details to be filled.



If he selects Reject

- 1. Analyzer selects Reject.
- 2. If Reject selected then rejection reason to be selected from the drop down list and remarks to be filled.

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- > Claim analyzer can view the details of previous hospitalization as well as documents attached.
 - 1. Documents can be downloaded by clicking on download option against document name.
 - 2. After checking documents, other details and selecting the decision for claim approval, finally clicks on submit.

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- After finding all details correct, selects Approve, fill amount and submit, then it is forwarded to Claim Settlement i.e. Supervisor.
- If finds out that some details or document is missing, selects query, fills remarks and submit, this query with remark is sent to hospital. First query (if any) is to be raised within 7 days, after that analyzer won't be able to query hospital.
- If details and documents are not right then select Reject, select the reason for rejecting and submit, the claim is rejected.

5 CLAIM SETTLEMENT

- > After approval from Analyzer, claim details is sent further to Claim settlement i.e. Supervisor
 - 1. First click on Claim Settlement in the left side of the menu.
 - 2. Then click on search pending TID's, a list will open. Select TID's from the list or you can manually enter a TID and press tab.
 - 3. All the details of beneficiary and package will open. There will be 2 options Approve or Reject.
 - If selects approve then fill the approved amount.



- If decision is reject then
- 1. Click on Reject
- 2. select the rejection reason and fill remark
- 3. After Approve/Reject, an annexure can be uploaded from the system by clicking on choose, selecting file and clicking on upload.



- > After checking all the details and document and selecting decision, click on submit. The claim is approved.
- One more feature is Re-call analyzer. If supervisor finds some issue in details or document, it cannot directly query to hospital. Supervisor clicks on re-call analyzer. The claim will be sent back to analyzer with comments from supervisor.

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